# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

A PUBLIC DOCUMENT

# STÄTEMENTE DE ECONOMIC INTERESTS FAIR POLITICAL PRACTICES COVERSPAGE



Please type or print in ink.

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KATHLEEN MORAN
COLUSA COUNTY CLERK RECORDE

NAME OF FILER Carter Denise **Jennings** 1. Office, Agency, or Court Agency Name Colusa County Division, Board, Department, District, if applicable Your Position **Board of Supervisors** Supervisor, District 5 ▶ If filing for multiple positions, list below or on an attachment. Agency: See Attached List 2. Jurisdiction of Office (Check at least one box) ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction) Multi-County <u>see</u> attached list County of Colusa ☐ City of \_ Other \_ 3. Type of Statement (Check at least one box) Leaving Office: Date Left \_\_\_\_\_/\_\_\_\_ Annual: The period covered is January 1, 2011, through December 31, 2011. (Check one) -or-O The period covered is January 1, 2011, through the date of The period covered is \_\_\_\_\_\_\_ through leaving office. December 31, 2011. O The period covered is \_\_\_\_\_\_, through Assuming Office: Date assumed \_\_\_\_\_/\_\_\_\_ the date of leaving office. Candidate: Election Year \_\_\_\_ \_\_\_\_\_ Office sought, if different than Part 1: \_ 4. Schedule Summary ► Total number of pages including this cover page: Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached Schedule B - Real Property − schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached None - No reportable interests on any schedule herein and in any attached schedules is true and complete. I acknowledge this is I certify under penalty of perjury under the laws of the State of California th 02/26/2012 Date Signed \_ Signati (month, day, year)

#### 2011 California Form 700 Attachment **Denise Jennings Carter**

Agency	Position	County
Colusa County Board of Supervisors	Supervisor, District 5	Colusa
Trindel Insurance Fund	Board Member	Colusa Alpine Del Norte Lassen Modoc Mono Plumas San Benito Sierra Trinity
Sacramento Valley Basinwide		
Air Pollution Control Council	Board Member	Colusa Butte Yuba Shasta Glenn Sacramento
LAFCO	Commissioner	Colusa

#### **SCHEDULE A-1** Investments

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

Denise Jennings Carter

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Apple, Inc.	Edison International
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Manufacturer	Utility
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000 X \$10,001 - \$100,000
X \$100,001 - \$1,000,000 ☐ Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other	NATURE OF INVESTMENT  Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
<u>// 11// 11</u>	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Chevron Corp	<u> </u>
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Petroleum	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 <b>-</b> \$100,000
X \$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or Mare (Report on Schedule C)
IF APPLICABLE, LIST DATE:	
/	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY IBM	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Manufacturer	
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	5100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock	Stock Other
Partnership O Income Received of \$0 - \$499	Partnership (Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	<u>, , 11 , , 11</u>
	ACQUIRED DISPOSED
	11
Comments:	

#### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

Denise Jenr

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Danina Janninga Carter

➤ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Benden Farms	
Name P.O. Box 212, Colusa, CA 95932	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one ☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2	Check one  Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY Farming	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED  \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:     \$0 - \$1,999     \$2,000 - \$10,000       111       111       111
NATURE OF INVESTMENT  Sole Proprietorship Partnership Other  Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION Co-Owner	YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 \$ OVER \$100,000	\$0 - \$499
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
Lundberg Family Farms, Sunwest Foods, Eden Foods, Colusa Milling, Sakata Seed, Sunfield Seeds	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity <u>or</u> City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     \$10,001 - \$100,000       11
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real properly are attached
Comments:	EPPC Form 700 (2011/2012) Sch. A-2

## SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Denise Jennings Carter

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS 4620 River Road	► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
CITY Colusa, CA	CITY
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     11	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	☐ Ownership/Deed of Trust ☐ Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	\$ \$0 - \$499 \$ \$500 - \$1,000 \$ \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Benden Farms	
You are not required to report loans from commercial	lending institutions made in the lender's regular course of without regard to your official status. Personal loans and iness must be disclosed as follows:
You are not required to report loans from commercial business on terms available to members of the public	without regard to your official status. Personal loans and
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of busi	without regard to your official status. Personal loans and iness must be disclosed as follows:
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of busi	without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)	without regard to your official status. Personal loans and ness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	without regard to your official status. Personal loans and ness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  Months/Years)	without regard to your official status. Personal loans and iness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business of Lender*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)	without regard to your official status. Personal loans and iness must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)
You are not required to report loans from commercial business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans and iness must be disclosed as follows:    NAME OF LENDER*   ADDRESS (Business Address Acceptable)

### SCHEDULE C Income, Loans, & Business **Positions** (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Denise Jennings Carter

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED  \$500 - \$1,000	GROSS INCOME RECEIVED  \$500 - \$1,000  \$1,001 - \$10,000  \$10,001 - \$100,000  OVER \$100,000  CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Satary  Spouse's or registered domestic partner's income  Loan repayment  Partnership  Sale of  (Real property, car, boat, etc.)  Commission or  Rental Income, list each source of \$10,000 or more
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER      You are not required to report loans from commercial leader retail installment or credit card transaction, made in the	ending institutions, or any indebtedness created as part of a lender's regular course of business on terms available to latus. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follow	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
Quad-C, Ltd	8 None <u>15</u>
ADDRESS (Business Address Acceptable)	<del>-</del>
P.O. Box 212, Colusa, CA 95932	SECURITY FOR LOAN    None
BUSINESS ACTIVITY, IF ANY, OF LENDER	X None Personal residence
Farming	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street desired
\$500 - \$1,000	City
<u>\$1,001 - \$10,000</u>	Guarantor
\$10,001 - \$100,000	
▼ OVER \$100,000	Other (Describe)
	(Bosonia)
Comments:	
	n western to

#### SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Denise Jennings Carter

► NAME OF SOURCE	▶ NAME OF SOURCE
PG&E Maxwell Power Plant	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
5001 Delavan Street, Maxwell, CA 95955	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Plant Dedication Ceremony	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11 / 15 / 11 <sub>\$</sub> 50 Lunch/Plant tour	\$
	\$
► NAME OF SOURCE	► NAME OF SOURCE
Hyatt Carmel Highlands, via CSAC Annual Conferenc	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
120 Highlands Drive, Carmel, CA 93923	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
CSAC Annual Conference Door Prize	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
11 / 30 / 11 s 390 One night hotel stay	
	\$
► NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	\$
	\$
Comments:	

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM	
Name	
Denise Jennings Cart	er

- · You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE	► NAME OF SOURCE
Regional Council of Rural Counties	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1215 K Street, Suite 1650	
CITY AND STATE	CITY AND STATE
Sacramento, CA 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Officer Installation	
DATE(S): 01 / 19 / 11 / AMT: \$ 88.65	DATE(S):/ AMT: \$
TYPE OF PAYMENT: (must check one) 🗵 Gift 🗌 Income	TYPE OF PAYMENT: (must check one) Gift Income
☐ Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
Food/Beverages at Officer Installation Reception	
▶ NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):/ AMT: \$	DATE(S):/
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one) Gift Income
Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
	il –
Comments:	